Fill in this inforr	nation to identify	y your case:					
Debtor 1 <u>David</u> First Name		Allen McVicker, Sr Middle Name Last Name		Che	Check if this is:		
Debtor 2 (Spouse, if filing)	Stephanie First Name	Ann Middle Name	McVicker Last Name	—   <b>I</b>	An amended filing		
United States Bankruptcy Court for the:		MIDDLE DIST. OF PENNSYLVANIA			A supplement showing postpetition chapter 13 income as of the following da		
Case number (if known)	1:22-bk-01888				MM / DD / YYYY		

Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe	Employment

۱.	Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse	
	If you have more than one job, attach a separate page with information about	Employment status	<ul><li>✓ Employed</li><li>✓ Not employed</li></ul>		<ul><li>✓ Employed</li><li>✓ Not employed</li></ul>	
	additional employers.	Occupation	Labor		Homemaker	
	Include part-time, seasonal, or self-employed work.	Employer's name	HANOVER FOOD	os .		_
	Occupation may include	Employer's address	1550 YORK STR	EET		
	student or homemaker, if it applies.	, ,	Number Street		Number Street	_
					_	
			HANOVER	PA 17331		
			City	State Zip Code	City State Zip Code	
		How long employed the	here? <u>7/2019</u>			

## Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$4,568.49	\$0.00
3.	Estimate and list monthly overtime pay.	3. 🛊	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$4,568.49	\$0.00

Official Form 106l Case 1:22-bk-01888-HWV

Desc

		F	or Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here	<b>→</b> 4.	\$4,568.49	\$0.00	-
5.	List all payroll deductions:	•	<u> </u>		
•	5a. Tax, Medicare, and Social Security deductions	5a.	\$829.81	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insurance	5e.	\$0.00	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$127.09	\$0.00	
	5h. Other deductions. Specify: See continuation sheet	5h. <b>+</b>	\$52.15	\$0.00	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f 5g + 5h$ .	+ 6.	\$1,009.05	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line	4. 7.	\$3,559.44	\$0.00	
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00	\$0.00	
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.				
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	\$580.00	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	O.	40.00	<b>*</b> 0.00	
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income.  Specify:	8h. <b>+</b> _	\$0.00	\$0.00	
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8	h. 9.	\$0.00	\$580.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spous	e. 10.	\$3,559.44	+ \$580.00	= \$4,139.44
11.	State all other regular contributions to the expenses that you list in Include contributions from an unmarried partner, members of your house friends or relatives.			r roommates, and othe	er
	Do not include any amounts already included in lines 2-10 or amounts	that are no	t available to pay e	expenses listed in Sch	edule J.
	Specify: Son's Contribution			11. •	+\$200.00
12.	Add the amount in the last column of line 10 to the amount in line income. Write that amount on the Summary of Your Assets and Liabili				\$4,339.44
13	if it applies.  Do you expect an increase or decrease within the year after you file.	le this form	12		Combined monthly income
	✓ No. None.	10111	••		
	Yes. Explain:				

Desc

Debtor 1 David Allen McVicker, Sr Debtor 2 Stephanie Ann McVicker

Case number (if known) <u>1:22-bk-01888</u>

5h.	Other Payroll Deductions (details)		For Debtor 1	For Debtor 2 or non-filing spouse
	LST		\$4.17	
	SUI		\$2.75	
	Local		\$45.23	
		Totals:	\$52.15	\$0.00

Main Document

	"II in this inform	antina ta idaa	4:6						
	ill in this inforn	nation to iden	tiry your case:			Che	ck if this	is:	
	Debtor 1	David First Name	Allen Middle Name	McVi Last N	cker, Sr ame	An amended filing  A supplement showing		•	postpetition
	Debtor 2 (Spouse, if filing)	Stephanie First Name	<b>Ann</b> Middle Name	McVi Last N			chapter 13 expenses a following date:		
	United States Bank	ruptcy Court for th	ne: MIDDLE DIST.	OF PENNS	SYLVANIA		MM / D	D / YYYY	<u> </u>
	Case number (if known)	1:22-bk-0188	8						
Of	fficial Form 10	)6J				-			
Sc	chedule J: Yo	our Expens	es						12/15
naı	rrect information. I	f more space is e er (if known). Ar	needed, attach anoth nswer every question	ner sheet to	ling together, both ar this form. On the top				
L	art 1: Descri	ibe Your Hous	senoid						
1.	Is this a joint cas	e?							
	✓ No	Debtor 2 live in a	separate household		es for Separate Housel	hold of	Debtor	2.	
2.	Do you have dep		] No 7 Yes. Fill out this in	oformation	Dependent's relati		to to	Dependent's	Does dependent
	Do not list Debtor Debtor 2.	1 and	for each depender		Debtor 1 or Debtor	r 2		age	live with you?
	Do not state the d	ependents'			<u>Daughter</u>			14	- ☑ Yes □ No
	names.				Daughter			12	Yes
					Son			2	□ No - ☑ Yes
									□ No □ Yes
									□ No - □ Yes
3.	Do your expense expenses of peopyourself and you	ple other than	✓ No ☐ Yes						
P	Part 2: Estima	ate Your Ong	oing Monthly Ex	oenses					
Est to	timate your expens	es as of your ba of a date after the	nkruptcy filing date he bankruptcy is file	unless you a	are using this form as a supplemental Sche	-	-	•	
			ash government assi on Schedule I: Your	-				Your expens	es
4.			penses for your resi				4	4.	
	If not included in	•	J						
	4a. Real estate ta	axes					4	4a	
	4b. Property, hor	meowner's, or ren	ter's insurance				4	4b	
	4c. Home mainte	enance, repair, an	d upkeep expenses				4	4c	
	4d. Homeowner's	s association or c	ondominium dues				4	4d.	

Desc

Case number (if known) 1:22-bk-01888

		Your exper	nses
5.	Additional mortgage payments for your residence, such as home equity loans	5	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$210.00
	6b. Water, sewer, garbage collection	6b	\$36.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$300.00
	6d. Other. Specify:	6d	
7.	Food and housekeeping supplies	7.	\$955.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$25.00
10.	Personal care products and services	10.	\$50.00
11.	Medical and dental expenses	11	\$151.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$550.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$20.00
14.	Charitable contributions and religious donations	14.	
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	15b.	
	15c. Vehicle insurance	15c.	\$90.00
	15d. Other insurance. Specify:	15d.	
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 <b>2019 Kia</b>	17a.	
	17b. Car payments for Vehicle 2 <b>2013 Dodge</b>	17b	\$200.00
	17c. Other. Specify: Conduit mortgage	17c	
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		
19.	Other payments you make to support others who do not live with you.  Specify:	19	

	tor 1 tor 2	David Allen McVicker, Sr Stephanie Ann McVicker	Case number (if known)	1:22-bk-01888			
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.					
	20a.	Mortgages on other property	20a				
	20b.	Real estate taxes	20b				
	20c.	Property, homeowner's, or renter's insurance	20c				
	20d.	Maintenance, repair, and upkeep expenses	20d				
	20e.	Homeowner's association or condominium dues	20e				
21.	Other	r. Specify:	<sup>21.</sup> <b>+</b> _				
22.	Calcu	ulate your monthly expenses.					
	22a.	Add lines 4 through 21.	22a	\$2,587.00			
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b	_			
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$2,587.00			
23.	Calcı	ulate your monthly net income.					
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$4,339.44			
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>_</b> _	\$2,587.00			
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$1,752.44			
24.	Do yo	you expect an increase or decrease in your expenses within the year after you file this form?					
		xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mortga	. ,				
	ت	No. Yes. Explain here: None.					